



Everybody. All the Time. Everywhere.

Achievement and Absenteeism

A 100% Tobacco Free School policy prohibits any tobacco, including alternative nicotine products or vapor products as defined by KRS 438.305, use by staff, students and visitors twenty-four hours a day, seven days a week, inside Board-owned buildings or vehicles, on school owned property, and during school-sponsored student trips and activities.

Student Health

- Tobacco is the leading cause of preventable death in the United States.¹ A strongly-enforced tobacco free school policy can prevent or delay students from using tobacco.^{2,3} Some studies have found up to a 30% reduction in student smoking.⁴
- Asthma is a leading cause of school absenteeism. Exposure to secondhand smoke is one of the leading triggers of asthma attacks.⁵
- Youth who smoke report more respiratory problems and illness than their non-smoking peers.⁶

Student Academic Achievement

- Students who use tobacco or are exposed to environmental tobacco smoke perform more poorly on cognitive tests compared to students not exposed to tobacco.⁷
- Students who smoke perform more poorly in school compared to their non-smoking peers.^{8,9,10}
- Students who smoke have more school absences than their non-smoking peers.¹¹

Employee Health and Performance

- Employees who currently use tobacco have greater rates of absenteeism than never-smokers and former smokers.^{12,13} Furthermore, absences may increase with the number of cigarettes smoked per day.¹⁴
- Reduced employee exposure to secondhand smoke, which has been determined to be unsafe in any amount.¹⁵

¹ U.S. Department of Health and Human Services. *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010.

² Wakefield MA, Chaloupka FJ, Kaufman NJ, Orleans CT, Barker DC, Ruel EE. Effect of restrictions on smoking at home, at school, and in public places on teenage smoking: cross sectional study. *BMJ* 2000;321:333.

³ Centers for Disease Control and Prevention. Effectiveness of School-Based Programs as a Component of a Statewide Tobacco Control Initiative – Oregon, 1999-2000. *MMWR* 2001;50:663-6.

⁴ Moore L, Roberts C, Tudor-Smith C. School smoking policies and smoking prevalence among adolescents: multilevel analysis of cross-sectional data from Wales. *Tobacco Control* 2001; 10: 117-123.

⁵ Environmental Protection Agency. *Managing Asthma in the School Environment*. Washington, DC: Environmental Protection Agency, 2010. EPA 402-K-10-004.

⁶ Bland M, Bewley BR, Pollard V, Banks MH. Effect of children's and parents' smoking on respiratory symptoms. *Arch Dis Child* 1978; 53:100-105.

⁷ Yalton K, Dietrich K, Auinger P, Lanphear BP, Hornung R. Exposure to environmental tobacco smoke and cognitive abilities among U.S. children and adolescents. *Environ Health Perspect* 2005;113:98-103.

⁸ Centers for Disease Control and Prevention. Health and Academics. Available from http://www.cdc.gov/healthyyouth/health_and_academics/data.htm.

⁹ Dilley, J. Research Review: School-based Health Interventions and Academic Achievement. Olympia, WA: Martin D, Wolf T, editors. 2009. Available from http://here.doh.wa.gov/materials/research-review-school-based-health-interventions-and-academic-achievement/12_HealthAcademic_E09L.pdf.

¹⁰ Breslau J, Miller E, Joanie Chung, WJ, Schweitzer, JB. Childhood and adolescent onset psychiatric disorders, substance use, and failure to graduate high school on time. *J Psych Res* 2011;45(3): 295-301.

¹¹ Charlton A, Blair V. Absence from school related to children's and parental smoking habits. *BMJ* 1989;298:90.

¹² Halpern M, Shiklar R, Rentz A, Khan Z. Impact of smoking status on workplace absenteeism and productivity. *Tob Control*. 2001; 10(3): 233-238.

¹³ Sindelar J, Duchovny N, Falba T, Busch S. If smoking increases absences, does quitting reduce them? *Tob Control* 2005; 14(2): 99-105.

¹⁴ Tsai SP, Gilstrap EL, Colangelo TA, et al. Illness absence at an oil refinery and petrochemical plant. *J Occup Environ Med* 1997;39:455-62.

¹⁵ U.S. Department of Health and Human Services, 2010.

